

Mental Health and Substance Abuse Pregnancy-Related Depression and Childhood Development

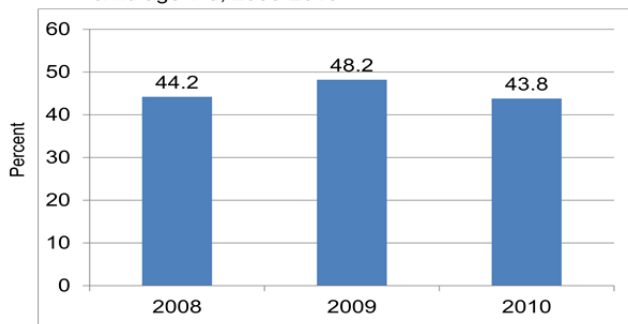
Pregnancy-related depression is one of the most common complications of childbirth, affecting nearly one in eight new mothers in Colorado annually. Pregnancy-related depression occurs during pregnancy or postpartum, including post loss. It persists beyond the early postpartum period up to one year after birth. It disrupts a woman's ability to care for herself and engage in healthy parenting behaviors. Early childhood development has a direct effect on an individual's health and development throughout life. The early years of a child's life are a foundation for future development and learning.

Why is this important?

Research shows children of depressed mothers are more likely to exhibit social and emotional problems; delays or impairments in cognitive, linguistic and social interactions; poor self-control; aggression; poor peer relationships; and difficulty in school.¹ Regular depression screening and education for all women during the prenatal and postpartum periods can increase awareness of the signs and symptoms, help identify depression sooner, and ultimately increase the number of women seeking treatment for this illness. The high incidence of pregnancy-related depression and the significant impact on the mother, her infant and other relationships result in a serious need for public health intervention. Furthermore, studies show the negative impact of adverse childhood experiences can be offset through early intervention, which begins with early childhood developmental screening.²

Where are we?

Percent of Colorado parents who were asked by a health care provider to fill out a questionnaire about development, communication, or social behavior of their child age 1-5, 2008-2010



Source: Colorado Child Health Survey, Colorado Department of Public Health and Environment

In 2009, 73 percent of mothers reported that a health care provider talked to them about what to do if they felt depressed during pregnancy or after delivery.

Source: Pregnancy Risk Assessment Monitoring System

Where do we want to be?

By 2016

- Increase to 60 percent, the percentage of parents who report being asked by a health care provider to fill out a questionnaire about development, communication or social behavior of their child ages 1 through 5.
- Increase to 80 percent, the percentage of mothers who report a health care provider talked to them about what to do if they felt depressed during pregnancy or after delivery.

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What is being done?

Improving pregnancy-related depression and child developmental screening requires an integrated approach across the life course. The state health department will continue to coordinate work among partners to address these issues across health, education, mental health, public health and early childhood systems at both the community and state levels. Health department efforts will include training and technical assistance, shared planning and policy discussions, and supporting the coordination of referral systems in communities. For example, the department will promote the use of standardized depression and child developmental screening tools in obstetric, pediatric and family practice settings, to improve early identification of pregnancy-related depression and child developmental delays. Additionally, the health department will collaborate with other agencies and private health plans to ensure coverage for routine pregnancy-related depression screening, assessment and intervention and to increase reimbursement for standardized child developmental screening. Similar partnerships will continue to advocate for enhanced child early intervention services, including expansion of eligibility.

High-risk groups

Although any woman can experience depression following birth, in Colorado some groups of women experience symptoms of depression in the postpartum period at a higher rate than others:³

- Young women ages 15-19
- Unmarried women
- African-American women
- Women with less than a high school education
- Women who have an income below 185 percent of the federal poverty level
- Women whose prenatal care is paid for by Medicaid

Underlying causes

Several factors are associated with an increased risk of postpartum depression, including depression before or during pregnancy, low self-esteem, high life stress, low socioeconomic status, inadequate social support, poor marital relationship, unplanned or unwanted pregnancy, history of physical abuse before or during pregnancy, difficulties with child care, difficult infant temperament, smoking, and giving birth to a preterm or low birth weight infant.^{3,4} Adverse experiences in prenatal and early childhood periods can influence lifelong health. “Toxic” stress experienced due to poverty can impact child development and the child’s health and learning trajectory. In addition to screening early and often for pregnancy-related depression and developmental delays, we can ensure that pregnant women and their young children have safe environments and supportive caregivers, as well as good nutrition, to mitigate the impact of these stressors.⁵ Supporting all families in building the ability to cope with challenges, develop social connections, and expand knowledge of parenting and child development, in addition to providing supports in times of need, will enhance screening and intervention efforts.² Family-friendly work policies that support breastfeeding and provide adequate maternity leave and paid sick leave reduce the stress women experience in the first year of a child’s life, improving maternal mental health and child development.

- (1) *National Institute of Child Health and Human Development Early Child Care Research Network. Chronicity of maternal depressive symptoms, maternal sensitivity, and child functioning at 36 months. Developmental Psychology. 1999; 35: 1297-1310.*
- (2) *Center for the Study of Social Policy. (2008). Strengthening Families: A Guidebook for Early Childhood Programs.*
- (3) *McCulloch, M. and Tolliver, R. Postpartum Depressive Symptoms Among Colorado Women. Health Watch. Colorado Department of Public Health and Environment. 2009; No 72.*
- (4) *Beck, CT. Postpartum Depression: It isn’t just the blues. American Journal of Nursing. 2006; 106 (5): 40-50.*
- (5) *Harvard Center on the Developing Child. (2010). The Foundations of Lifelong Health are Built in Early Childhood.*

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